

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733813

FILED  
Apr 25, 2008  
Secretary of State

**Entity Name:** PALM BEACH HISTORICAL ARMS COLLECTOR'S ASSOCIATION, INC.

**Current Principal Place of Business:**

826 N ATLANTIC DR  
LANTANA, FL 33462 US

**New Principal Place of Business:**

**Current Mailing Address:**

826 N ATLANTIC DR  
LANTANA, FL 33462 US

**New Mailing Address:**

**FEI Number:** 59-2181304      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TAIT, MICHAEL  
826 N ATLANTIC DR  
LANTANA, FL 33462 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: S      ( ) Delete  
Name: HUNT, IAN  
Address: 4570 BRADY BLVD  
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: D      ( ) Delete  
Name: STEGALL, NEIL  
Address: 3127 WASHINGTON ROAD  
City-St-Zip: WEST PALM BEACH, FL 33405 US

Title: T      ( ) Delete  
Name: TAIT, MICHAEL  
Address: 826 N ATLANTIC DR  
City-St-Zip: LANTANA, FL 33462 US

Title: D      ( ) Delete  
Name: LEHMAN, ALFRED  
Address: 1304 PINE ST  
City-St-Zip: MELBOURNE, FL 32951 US

Title: VP      ( ) Delete  
Name: RICHTER, CHARLES  
Address: 909 ARNOLD AVE  
City-St-Zip: LANTANA, FL 33462 US

Title: P      ( ) Delete  
Name: BEACH, GEORGE  
Address: 5327 BLUEBERRY HILL AVE  
City-St-Zip: LAKE WORTH, FL 33458 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NEIL STEGALL

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DIRE

04/25/2008

\_\_\_\_\_  
Date